



شبكة المعلومات الجامعية

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ





شبكة المعلومات الجامعية



شبكة المعلومات الجامعية

التوثيق الالكتروني والميكرو فيلم

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
على هذه الأفلام قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

في درجة حرارة من 15 – 20 مئوية ورطوبة نسبية من 20-40 %

To be kept away from dust in dry cool place of
15 – 25c and relative humidity 20-40 %



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بعض الوثائق الأصلية تالفة



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بالرسالة صفحات

لم ترد بالأصل

B 1.1.1

Transvaginal Electrical Stimulation Versus Vaginal Cones In Female Idiopathic Detrusor Instability

Thesis

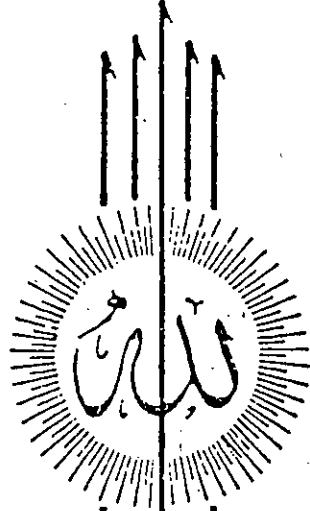
Submitted in Partial Fulfillment for the Requirement
Of
Doctoral Degree in Physical Therapy

By

ADLY ALY HEIDER SABBOUR
B.Sc. & M. Sc. in Physical Therapy
Assistant Lecturer of Physical Therapy
For
Gynaecology and Obstetrics

Faculty of Physical Therapy
Cairo University

2001



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

قَالُوا سُبْحَانَكَ لَا عِلْمَ لَنَا إِلَّا مَا
عَلَّمْتَنَا إِنَّكَ أَنْتَ الْعَلِيمُ الْحَكِيمُ

مَكِّي
الْبَقَرَةُ - ٢٢٢

Supervisors

Dr. Fahima Metwally Okeel

*Assistant Professor and Acting Chairman of Physical Therapy Department
for Gynaecology and Obstetrics
Faculty of Physical Therapy*

Cairo University

Fahima M. Okeel 21-7-2001

Dr. SOBHI KHALIL ABO LOUZ

*Prof. of Gynaecology and Obstetrics
Faculty of Medicine
Ain Shams University*

Sobhi Khalil Aboulouz

Dr. Salwa Mostafa El Badry

*Lecturer of Physical Therapy
for Gynaecology and Obstetrics
Faculty of Physical Therapy
Cairo University*

ADLY ALY HEIDER SABBOUR

Transvaginal Electrical Stimulation Versus Vaginal Cones In Female Idiopathic Detrusor Instability/ Adly Aly Heider Sabbour; supervisors Fahima Metwally Okeel, Sobhi khalil Abo Louz, Salwa Mostaf El Badry.-Cairo University.-Faculty Of Physical Therapy.- Physical Therapy Department For Obstetrics And Gynaecolgy.-year 2001.-around 350 page.-Doctoral Thesis.

Abstract

This study was conducted to determine the effectiveness of transvaginal electrical stimulation versus vaginal cones in reducing the bladder over-activity. Fifty volunteers' postmenopausal women participated in this study. They were divided randomly into two groups. Group (A) had been treated with transvaginal electrical stimulation while group (B) had been treated with vaginal cones. The outcome measures included: (VAS), pad test and the urodynamics studies. The results of both groups showed decreased in urine loss in (VAS) and pad test. However, comparing the results in both groups, showed decreased in group (A) compared to group (B). Group (A) showed increased in the EMG of the external urethral sphincter and the parameters of bladder volumes while detrusor pressure results showed decreased. Comparing the results of both groups after at end of treatment there were increased in the vol. at fs. & At cys-cap. Also, was decreased in detrusor pressure at 20ml infusion and vol. at fs in group (A). Accordingly it could be concluded that transvaginal electrical stimulation was found to be more effective than vaginal cones in treating idiopathic detrusor instability.

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Dedication

This work is dedicated

To

My parents & my family

With all love, respect and my sincerest
wishes for their healthy aging

LIST OF ABBREVIATIONS

Abbreviation	Interpretation
ACOG:	American College of Obstetricians and Gynaecologists
ALPP:	Abdominal leak point pressure
BMI:	Body mass index
Cm H ₂ O:	Centimeter of water
cms:	Centimeters
CMG:	Cystometrogram
CNS:	Central Nervous System
Cys-cap:	Cystometric capacity
DH:	Detrusor hyperreflexia
DHIC:	Detrusor hyperactivity with impaired bladder contractility
DI:	Detrusor instability
DSD:	Detrusor sphincter dyssynergia
EAS:	External anal sphincter
EMG:	Electromyography
FES:	Functional electrical stimulation
Fig.:	Figure
gms:	Grams
GSI:	Genuine stress incontinence
GSUI:	Genuine stress urinary incontinence
Hz:	Hertz
IAP:	Intra abdominal pressure
IBM:	International business machines
ICS:	International Continence Society
i.e.	That is
ISD:	Intrinsic sphincter deficiency
Kg /m ² :	Kilograms/meter ²
Kgs:	kilograms
L ₁ :	First lumbar nerve root
L ₂ :	Second lumbar nerve root
mA:	Mill ampere
MDA:	Maximum detrusor activity
ml/min:	Milliliter/minute
ml/sec:	Milliliter / second
ml:	Milliliter
mm:	Millimeter
MP:	Maximum pressure
MRI:	Magnetic resonance imaging
μsec:	Micro second

μ volt:	Micro volt
NANC:	Nonadrenergic Noncholinergic
No.:	Number
NOS:	Nitric oxide synthase
Oz:	Ounce
P.value:	Probability of error
P _{abd.} :	Abdominal pressure
P _{det.} :	Detruosr pressure
PFE _s :	Pelvic floor exercises
PFME _s :	Pelvic floor muscles exercises
Post:	After
Pre:	before
P _{ura} :	Urethral pressure
P _{ves.} :	Bladder pressure
PVR:	Postvoid residual
Q _{infus} :	Infusion flow rate
Q _{max} :	Maximum flow rate
S1:	First sacral nerve root
S2:	Second sacral nerve root
S3:	Third sacral nerve root
S4:	Fourth sacral nerve root
S5:	Fifth sacral nerve root
S.D:	Standard deviation
SNS:	Sacral nerve stimulation
SPSS:	Statistical package for the social sciences
ST:	Suppression time
SUI:	Stress urinary incontinence
T10:	Tenth thoracic nerve root
T11:	Eleventh thoracic nerve root
t-test:	The student's t test
ttt:	Treatment
UI:	Urinary incontinence
UPP:	Urethral pressure profilemetry
VAS:	Visual analogue scale
V _{infus} at cys-cap:	Infusion volume at Cytometric capacity
V _{infus} at fs:	Infusion volume at first sensation of filling
V _{infus} :	Infusion volume
VIP:	Vasoactive intestinal polypeptide
Vs:	Versus
X2:	Chi-square test
Yrs:	Years

°C: Degree centigrade
>: More than
<: Less than